

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL.: 587-0460 FAX: 587-0470



A9:46

Concept State of Victor and the



## LOBBYIST REGISTRATION FORM

(See back of this form for instructions)
(Type or Print Clearly)

PART I LOBBYIST				
NAME(Last)	(First)	(Middle)		TELEPHONE
MORRIS	GEORGE	<b>A</b>		808/531-4551
MAILING ADDRESS	(Street)	(City)	(State)	(Zip Code)
222 S. V	INEYARD ST., STE. 401	HONOLULU	ні	96813-2453
		yed by a business entity which has been		) TELEPHONE
G.A. MORRIS, INC.				808/531-4551
MAILING ADDRESS	(Street)	(City)	(State)	(Zip Code)
222 S. V	INEYARD ST., STE. 401	HONOLULU	HI	96813-2453
PART II ORGANIZATION				
NAME OF ORGANIZATI	ON YOU LOBBY FOR (Do not abbi	reviate)		TELEPHONE
VALIC, V	ARIABLE ANNUITY LIFE IN	SURANCE COMPANY		713/831-4987
MAILING ADDRESS	(Street)	(City)	(State)	(Zip Code)
2919 ALL	EN PARKWAY, L4-02	HOUSTON	TX	77019
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT TELEPHONE				
MELODY T.	RIITAV			808/531-4551
MAILING ADDRESS	(Street)	(City)	(State)	(Zip Code)
222 C VI			•	,
222 3. V	INEYARD ST., STE. 401	HONOLULU	HI	96813-2453
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
Agriculture	Education	Human Services		cience, Technology &
[] Agriculture	Education	[ ] Mullian Services	<b>E</b>	conomic Development
Communications & Government Operations & Intergovernmental Relations, Tourism & Recreation Public Utilities Finance International Affairs				
Consumer Protect	ction & Hawalian Affairs	Labor & Employm	ent T	ransportaion
Culture, Arts, Hist Preservation	toric Health	Planning, Land & \ Use Management	Water O	ther: (indicate below)
Ecology, Energy, Environmental Pr	Housing cotection	Public Safety & Co	orrections	21.85
			<u> </u>	
PART IV CERTIF CATION OF LOBBYIST  I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.				
	(Signature of Lobbyist)		(Date	<u>)</u>
	(Signature of Ecocytot)			
PART V AUTHO	RIZATION TO LOBBY			
TED G. k	KENNEDY	TITLE OF AUTHORIZIN SENIOR COUNSEL,		
NAME OF ORGANIZATION	ON (if applicable)			TELEPHONE
VALIC. \	VARIABLE ANNUITY LIFE IN	ISURANCE COMPANY		713/831-4987
MAILING ADDRESS	(Street)	(City)	(State)	(Zip Code)
2919 ALI	LEN PARKWAY, L4-02	HOUSTON	TX	77019
I hereby authorize the above—named person to engage in lobbying activities on behalf of the undersigned.				
1/13/03				
Le	Paranatad	(Date		
(Signati	ure of Authorizing Officer or Person	Luablezelifan)	Cate	1